

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective December 8, 2004

Application or Docket Number  
 10-028440

**CLAIMS AS FILED - PART I**

(Column 1)	(Column 2)	SMALL ENTITY TYPE <input type="checkbox"/>	OTHER THAN SMALL ENTITY
U.S. NATIONAL STAGE FEES			
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300	<input type="checkbox"/>
EXAMINATION FEE	Satisfies PCT Article 33(1)-(4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200	<input type="checkbox"/>
SEARCH FEE	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500	<input type="checkbox"/>
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =	<input type="checkbox"/>
TOTAL CHARGEABLE CLAIMS	23 minus 20 = *	*	<input type="checkbox"/>
INDEPENDENT CLAIMS	2 minus 3 = *	*	<input type="checkbox"/>
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>		
* If the difference in column 1 is less than zero, enter "0" in column 2			
		TOTAL	TOTAL
		RATE	FEE
		BASIC FEE	
		EXAM. FEE	
		SEARCH FEE	
		X \$ 125 =	
		X \$ 25 =	
		X \$ 100 =	
		+ \$ 180 =	
		TOTAL	
		RATE	FEE
		BASIC FEE	
		EXAM. FEE	
		SEARCH FEE	
		X \$ 250 =	
		X \$ 50 =	
		X \$ 200 =	
		+ \$ 360 =	
		TOTAL	

**CLAIMS AS AMENDED - PART II**

AMENDMENT A	(Column 1)		(Column 2)		(Column 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	<input type="checkbox"/>	<input type="checkbox"/>
Total	*	Minus	**	=	<input type="checkbox"/>	<input type="checkbox"/>	
Independent	*	Minus	***	=	<input type="checkbox"/>	<input type="checkbox"/>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
AMENDMENT B	(Column 1)		(Column 2)		(Column 3)	RATE	ADDI- TIONAL FEE
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	<input type="checkbox"/>	<input type="checkbox"/>
Total	*	Minus	**	=	<input type="checkbox"/>	<input type="checkbox"/>	
Independent	*	Minus	***	=	<input type="checkbox"/>	<input type="checkbox"/>	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>	<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	
					RATE	ADDI- TIONAL FEE	
					X \$ 25 =		
					X \$ 100 =		
					+ \$ 180 =		
					TOTAL ADDIT. FEE		
					RATE	ADDI- TIONAL FEE	
					X \$ 50 =		
					X \$ 200 =		
					+ \$ 360 =		
					TOTAL ADDIT. FEE		

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.